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FACSIMILE COVER SHEET**OFFICIAL**

Deliver to: Steven O. Douglas, USPTO Art Group: 3751
Facsimile No.: 703 872-9306 Date: July 23, 2004
From: James Henry, Reg. No. 41,064
Our Docket No.: 5153P004 Number of pages 11 including this sheet.
Application No.: 10/626,332 Filing Date: 7/24/2003
Docket Due Date(s): _____

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: <u>Preliminary</u> (<u>7</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (In triplicate) (_____ pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (_____ pgs) w/cover & abstract)	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (_____ pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of <u>Facsimile</u>	<input type="checkbox"/> Reply Brief (_____ pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (_____ pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: _____ sheets, _____ figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (_____ pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (_____ pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

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Pat Sullivan
Pat Sullivan

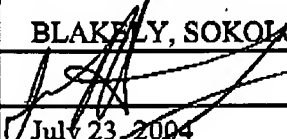
07/23/2004
Date


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/626,332
		Filing Date	July 24, 2003
		First Named Inventor	Peter C. Hollub
		Art Unit	3751
		Examiner Name	Steven O. Douglas
Total Number of Pages in This Submission	11	Attorney Docket Number	5153P004

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Facsimile Transmittal Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James Henry, Reg. No. 41,064 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	July 23, 2004

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Typed or printed name	Pat Sullivan		
Signature		Date	July 23, 2004

Based on PTO/SB/21 (04-04) as modified by Blakeley, Sokoloff, Taylor & Zafman (wtr) 08/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2004

Effective 10/01/2004. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 338.00

Complete if Known

Application Number 10/626,332
 Filing Date July 24, 2003
 First Named Inventor Peter C. Hollub
 Examiner Name Steven O. Douglas
 Art Unit 3751
 Attorney Docket No. 5153P004

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account

Deposit
Account
Number

02-2666

Deposit
Account
Name

Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☐ Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	180	2005	90	Provisional filing fee	
SUBTOTAL (1)					(5)

2. EXTRA CLAIM FEES

Total Claims 36 - 20* = 16 x 9.00 = \$144.00
 Independent Claims 8 - 3** = 5 x 43.00 = \$215.00
 Multiple Dependent

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple Dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(8) 273.00

**or number previously paid, if greater. For Reissues, see below

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	65.00
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1404	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or release)	
1502	480	2502	240	Design issue fee	
1503	940	2503	320	Plant issue fee	
1480	130	2480	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
8021	40	9021	40	Recording each patent assignment per property (times number of properties)	
1809	770	1809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify)					
SUBTOTAL (3)					(8) 65.00

* Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type)

James Henry

Registration No.
(Attorney/Agent)

41,064

Complete (if applicable)

Telephone

(714) 557-3800

Signature

Date

07/23/04

Based on PTO/SB/17 (10-03) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 02/10/2004.
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